PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

MR1679-245

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			7				r	RATE	FEE) . I	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ţ		375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=		* &		ſ	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		* 10-		Ī	X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				Ì	+140=		OR	+280=	
* If	the difference	in column 1 is	less than z	ero, ente	r "0" in c	olumn 2	L	TOTAL	375	OR	TOTAL	
CLAIMS AS AMENDED - PART II									7.	,	OTHER	THAN
× .	1170 100 Wallender by care a se		والمسائد والمحادد			(Column 3)		SMALL	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM		1	+140=		OR	+280=	
							L	TOTAL		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	P	NDDIT. FEE			AUDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	П	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	100
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA				T CLAIM		J				.000	
							Ł	+140=		OR	+280= TOTAL	
							,	ADDIT. FEE		OR	ADDIT. FEE	
_		(Column 1)			mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	· !	RATE	ADDI- TIONAL FEE
Š	Total	*	Minus	**		=	П	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	11	X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		J ∤					
.* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140=		OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
		nber Previously Pa					er fou	nd in the app	oropriate bo	x in co	lumn 1.	